

SYSTEM IMPROVEMENT RECOMMENDATIONS

Recommendation #1:

Study and make recommendations regarding how to integrate and improve day habilitation services and other integrated day activities for people with developmental disabilities (DD).

Why?

Texas day habilitation services are not in compliance with the Home and Community Based Services (HCBS) settings rule and Texas only has four years to bring the system into compliance. During the 84th Texas Legislature, the bill slated to address compliance planning, improve day habilitation, and ensure sufficient regulatory oversight through developing a stakeholder workgroup (SB 204) did not pass.

Recommendation #2:

Study and make recommendations regarding how to fairly determine a Personal Needs Allowance (PNA) for people who pay for room and board with their Social Security Income (SSI)/Social Security Disability Insurance (SSDI).

Why?

Minimum requirements do not exist for personal spending and community integration provisions covered by the PNA for people using HCBS waiver services. In contrast, all people receiving institutional services are required to receive a minimum of \$60 in personal spending and are not subject to requirements around community integration.

Recommendation #3:

Study and make recommendations regarding how to implement peer support services as a Medicaid paid benefit for people with DD.

Why?

People with DD have unique experiences and perspectives to share that could significantly influence their peers to gain control of their service plans and benefits, among many other things. Implementing peer support services in the DD system could reduce overall individual plan costs and expand employment options for people with DD. Peer supports paid for by Medicaid in the mental health system are evidence of the potential benefits for people with DD and the DD system. Gaining independence and community integration through the support of their peers is possible.

Recommendation #4:

Study and make recommendations regarding how to eliminate or reduce conflict of interest in the Community Living Options (CLO) process for people in intermediate care facilities (ICFs).

Why?

Expand the Community Living Options Information Process function of the Local Intellectual and Developmental Disabilities Authorities (LIDDAs) to include all people in private ICFs. LIDDAs are already paid to provide this service for State Supported Living Center (SSLC) residents.

Recommendation #5:

Study and make recommendations regarding how to more adequately support people with complex medical and physical support needs to achieve community integration in the least restrictive setting to meet their needs.

Why?

In order to more adequately support people with complex medical and physical support needs to achieve community integration in the least restrictive setting to meet their needs, many issues must be addressed. Medical rate enhancement in the long term services and supports system is necessary because it is widely believed that the current rate does not adequately address the medical support needs of some waiver participants. DADS, through its high medical needs workgroup, is exploring how other states handle this issue and is making modification recommendations. The bias towards restrictive settings for people with complex medical and physical support needs must be narrowed by prioritizing access to people in their own home.

Recommendation #6:

Study and make recommendations regarding how to meaningfully include people with DD on councils, workgroups, and committees concerning their health and human services.

Why?

People with DD should be included in councils, workgroups and committees that impact their service system. However, achieving meaningful inclusion in these processes is complicated. Although health and human services agencies in Texas are minimally including people with DD, the supports to ensure their meaningful participation as valued stakeholders are inadequate. In addition, making the structure, format, and setting accessible to all people with disabilities requires an accessibility framework that includes sensory and cognitive adaptations.

Recommendation #7:

Ensure that people in institutions who are deafblind have access to the Deaf Blind with Multiple Disabilities (DBMD) waiver via Promoting Independence Initiative.

Why?

The Promoting Independence initiative for people in SSLCs is limited to the Home and Community-based Services (HCS) waiver program. More appropriate waiver programs are available and should be explored. Specifically, allowing access to the DBMD waiver offers a simple solution to a persistent problem for people who are deafblind in institutions.

Recommendation #8:

Study and make recommendations regarding how to expand meaningful employment outcomes for people with DD and the appropriate data collection across all state programs.

Why?

Employment for people with DD has gained considerable attention and many state programs have reported achieving meaningful employment outcomes. However, their success cannot be objectively determined because the state has not defined meaningful quantitative and qualitative employment outcomes. Potentially significant data from the programs are not consistently collected and the unstandardized data that is collected are often incompatible. These issues must be addressed for decision-makers to effectively and efficiently establish meaningful employment programs for people with DD.

Recommendation #9:

Study and make recommendations regarding how to prohibit subminimum wage payments by state use program contractors.

Why?

Other states have successfully implemented supported and integrated employment opportunities for people with disabilities to earn a competitive wage. By establishing financial assistance and incentives for employers who eliminate segregated settings and subminimum wages for people with disabilities, these states foster equality and independence. Texas should explore the best practices used by other states to gain insight on how to prohibit the practice of allowing the payment of subminimum wages to people with disabilities by state use program contractors.

Recommendation #10:

Study and make recommendations regarding how to implement a plan to transition people with disabilities away from segregated settings with subminimum wage employment and into integrated settings with competitive wage employment.

Why?

Transition services can mitigate many issues in this area. In addition to segregated settings not complying with HCBS settings rule, a large number of people attend workshops at day habilitation sites that are co-located and managed by a single provider. Segregated workshops need to be addressed in conjunction with a review of day habilitation services. In addition, other states' successful efforts to comply with the HCBS settings rule and their efforts to eliminate segregated settings and the payment of subminimum wages should be explored.

Recommendation #13:

Ensure independent ombudsmen are available for people with DD experiencing barriers to accessing managed care services.

Why?

Consumers need unbiased navigators and legal representation in due process hearings to ensure their benefits are best utilized and accessed.